PATENT APPLICATION FEE DETERMINATION RECORD , P. A CLAIMS AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY OR SMALL ENTITY (Column 2) NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE \$ 355 OR \$ 7/0. **TOTAL CLAIMS** minus 20 = x\$ q = ×\$18 = OR 234 INDEPENDENT CLAIMS minus 3 = ×40= OR ×80= MULTIPLE DEPENDENT CLAIM PRESENT 320. OR If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY **CLAIMS HIGHEST** REMAINING PRESENT NUMBER ADDI-ADDI-**AFTER AMENDMENT** RATE PREVIOUSLY **EXTRA** TIONAL RATE TIONAL AMENDMENT PAID FOR FEE FEE Total Minus x\$ OR x\$ Independent Minus Х OR = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL TOTAL OR ADDIT. FEE (Column 1) ADDIT. FEE (Column 2) (Column 3) **CLAIMS** HIGHEST  $\boldsymbol{\omega}$ REMAINING ADDI-NUMBER **PRESENT** ADDI-AMENDMENT AFTER RATE TIONAL **PREVIOUSLY EXTRA** RATE TIONAL AMENDMENT PAID FOR FEE FEE Total Minus x\$ '= OR х\$ʻ Independent Minus = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL TOTAL (Column 1) ADDIT FEE ADDIT FEE (Column 2) (Column 3) CLAIMS HIGHEST ပ REMAINING ADDI-NUMBER PRESENT ADDI-AMENDMENT AFTER TIONAL **PREVIOUSLY EXTRA** RATE TIONAL RATE AMENDMENT FEE PAID FOR FEE Total Minus x\$ OR ×5 Independent Minus = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR = If the entry in column 1 is less than the entry in column 2, write 10° in column 3 TOTAL FOTAL BEST AVAILABLE CO

Application of Docket Number

|   | PATENT A   | APPLICATION Efforts                       | ON FEE D        | RD  | Application      | or Doc              | ket Number               |      |                     |                        |
|---|--|---|-----------------|---|------------------|---------------------|--------------------------|------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                 |   |                  |                     | LL ENTITY                | OR   | OTHEF<br>SMALL      |                        |
| FOR   |  | NUMB                                      | ER FILED        | NUMBER                                      | EXTRA            | RATE                | FEE                      | ]    | RATE                | FEE                    |
| BASI  | C FEE  |   | <b>10</b>       | att.  | ÷ 200            |                     | 395.00                   | OR   |                     | 790.00                 |
| TOTA  | L CLAIMS   | 2   | ン minus         | 20 = *                                      | <u>ي</u>         | x\$11               | =                        | OR   | x\$22=              | 44                     |
| INDE  | PENDENT CLA  | MIMS                                      | 2 minu          | s 3 =   *                                   |                  | =                   | OR                       | x82= |                     |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                 |   |                  |                     | =                        | OR   | +270=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |                 |   |                  | ТОТА                | L                        | OR   | TOTAL               | 834                    |
|   | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |   |                 |   |                  | SMA                 | ALL ENTITY               | OR   |                     | R THAN<br>ENTITY       |
| ENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE   |      | RATE                | ADDI-<br>TIONAL<br>FEE |
| MOI   | Total  | * 32                                      | Minus           | ** 22                                       | = 10             | x\$14               | <u>-</u>                 | OR   | x\$22=              | 180.a                  |
| AMENDMENT   | Independent  | . 7                                       | Minus           | *** 3                                       | = 4              | 40<br>x4f=          | =                        | OR   | x82=                | 320.0                  |
| ٧   | FIRST PRES   | SENTATION O                               | F MULTIPLE      | +135  | =                | OR                  | +270=                    |      |                     |                        |
|   |  | (Column 3)                                | TOT<br>ADDIT. F |   | OR               | TOTAL<br>ADDIT. FEE | 500.°                    |      |                     |                        |
| ENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | Г               | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE   |      | RATE                | ADDI-<br>TIONAL<br>FEE |
| M   | Total  | *   | Minus           | **  | =                | x\$11               | =                        | OR   | x\$22=              |                        |
| AMENDMEN  | Independent  | *   | Minus           | ***   | =                | x41:                | =                        | OR   | x82=                |                        |
| <u> </u>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |   |                 |   |                  |                     | j=                       | OR   | +270=               |                        |
|   | (Column 1) (Column 2) (Column 3)                             |   |                 |   |                  |                     | EE                       | OR   | TOTAL<br>ADDIT. FEE |                        |
| ENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMEN  | Mar Life        | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RAT                 | ADDI-<br>E TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total  | *   | Minus           | **  | =                | x\$11               | =                        | OR   | x\$22=              |                        |
|   | Independent  | *   | Minus           | ***   | =                | x41                 | =                        | OR   | x82=                |                        |
| <   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |   |                 |   |                  |                     | 5=                       | OR   | +270=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                 |   |                  |                     |                          |      |                     |                        |

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

| CLAIMS AS FILED - PART I (Column 1) (Column 2) |  |   |                                       |                       |                                  |                                      | SMALL ENTITY TYPE O         |                     |                        | OTHER THAN R SMALL ENTITY |                     |                       |    |
|--|--|---|---------------------------------------|-----------------------|----------------------------------|--------------------------------------|-----------------------------|---------------------|------------------------|---------------------------|---------------------|-----------------------|----|
| TOTAL CLAIMS                                   |  |   |                                       |                       |                                  |                                      | ſ                           | RATE                | FEE                    |                           | RATE                | FEE                   |    |
| FOR  |  |   | NUMBER FILED                          |                       | NUMBER EXTRA                     |                                      |                             | BASIC FEE           | 375.00                 | OR                        | BASIC FEE           | 7 <b>9</b> 0.00       | )  |
| TOTAL CHARGEABLE CLAIMS                        |  |   | 32 minus =                            |                       | * /                              |                                      |                             | X\$ 9=              |                        | OR                        | X\$18=              | ]                     |    |
| INDEPENDENT CLAIMS                             |  |   | 7 mir                                 | nus <b>G</b> =        | * <i>\P</i>                      |                                      |                             | X42=                |                        | OR                        | X8 <b>∕</b> €=      | 1                     |    |
| MULTIPLE DEPENDENT CLAIM P                     |  |   | RESENT                                |                       |                                  | ľ                                    | +140=                       |                     | OR                     | +280=                     |                     |                       |    |
| * If   | the difference   | in column 1 is                              | less than zero, enter "0" in column 2 |                       |                                  | ı                                    | TOTAL                       |                     | OR                     | TOTAL                     | 770.                | $\neg$                |    |
| CLAIMS AS AMENDED - PART II                    |  |   |                                       |                       |                                  |                                      | OTHER SMALL ENTITY OR SMALL |                     |                        | THAN                      |                     |                       |    |
| AMENDMENT I                                    |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | 1                                     | HIGH<br>NUM<br>PREVI  | HEST<br>HBER<br>OUSLY<br>FOR     | PRESENT<br>EXTRA                     |                             | RATE                | ADDI-<br>TIONAL<br>FEE |                           | RATE                | ADDI-<br>TIONA<br>FEE |    |
|  | Total  | * 32  | Minus                                 | **                    | 32                               | = /6                                 |                             | X\$ 9=              |                        | OR                        | X\$18=              |                       | ٠  |
| AME  | Independent  | * 1   | Minus                                 | ***                   | 1                                | ]= 4                                 |                             | X42=                |                        | OR                        | X8 <b>6</b> =       |                       |    |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                   |   |                                       |                       |                                  |                                      | ا ا                         | +140=               |                        | OR                        | +280=               |                       |    |
|  |  | •   |                                       |                       |                                  |                                      | I                           | TÖTAL<br>ADDIT. FEE |                        | OR                        | TOTAL<br>ADDIT, FEE |                       |    |
|  |  | (Column 1)                                  |                                       |                       | ımn 2)                           | (Column 3)                           |                             | , WOII. I EE        |                        | _                         |                     |                       |    |
| AMENDMENT                                      |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                       | NUN<br>PREV           | HEST<br>MBER<br>IOUSLY<br>D FOR  | PRESENT<br>EXTRA                     |                             | RATE                | ADDI-<br>TIONAL<br>FEE |                           | RATE                | ADDI<br>TIONA<br>FEE  |    |
|  | Total  | *   | Minus                                 | **                    |                                  | =                                    | ]                           | X\$ 9=              |                        | OR                        | X\$18=              |                       |    |
|  | Independent  | *   | Minus                                 | ***                   | T OL 4111                        | =                                    | 4                           | X42=                |                        | OR                        | X84=                |                       |    |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |   |                                       |                       |                                  | <b>J</b> .                           | +140=                       |                     | OR                     | +280=                     |                     |                       |    |
|  |  |   |                                       |                       | ·                                |                                      | i                           | TOTAL<br>ADDIT. FEE |                        | OR                        | TOTAL<br>ADDIT. FEE |                       |    |
|  |  | (Column 1)                                  |                                       |                       | ımn 2)                           | (Column 3)                           |                             |                     |                        | _                         |                     |                       |    |
| AMENDMENT                                      |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                       | NUI<br>PREV           | HEST<br>MBER<br>YIOUSLY<br>D FOR | PRESENT<br>EXTRA                     |                             | RATE                | ADDI-<br>TIONAL<br>FEE |                           | RATE                | ADDI<br>TIONA<br>FEE  | ٩L |
|  | Total  | *   | Minus                                 | **                    |                                  | =                                    | ]                           | X\$ 9=              |                        | OR                        | X\$18=              | ·                     |    |
|  | Independent  | *   | Minus                                 | ***                   |                                  | ]=                                   |                             | X42=                |                        | OR                        | X84=                |                       |    |
| ال   | FIRST PRESE  | NTATION OF M                                | IULTIPLE DE                           | PENDE                 | NT CLAIM                         | 1                                    |                             | +140=               |                        | OR                        |                     |                       |    |
| ` #r   | If the entry in colu<br>If the "Highest Nu<br>If the "Highest Nu | ımber Previously F                          | Paid For" IN TH<br>Paid For" IN TH    | IS SPACE<br>IIS SPACI | E is less th<br>E is less th     | an 20, enter "20<br>an 3, enter "3." | ٠.                          | TOTAL<br>ADDIT. FEE | propriete be           | OR                        | TOTAL<br>ADDIT. FEE |                       |    |